NDHSAA Coop Application

Please review coop guidelines prior to beginning the application process.

This single form is to be used by all schools involved in this cooperative sponsors application will be accepted and presented to the NDHSAA Board of Directors onl entering the required information. Each school must provide an official signature.	y upon all schools
must be used for gender specific athletics. Fine arts are not gender specific.	AFTER END OF SONGON

If approved, this coop would begin in school year: 2020-2021

Grades involved with this application: Please check one. (7-8) X (7-12) (9-12) X

Name of schools involved in this application: Host school must be listed first.

Enrollments for grades involved

- SUBMITTED

NO other COOPS

Dakota Prairie	7-8	44_7-12	9-12 90
Lakota	7-8	29 7-12	9-12 47
387 10 15	7-8_	7-12	9-12
	7-8_	7-12	9-12
	7-8_	7-12	9-12

(ex: girls' basketball, speech etc.) Activity covered by this application: Volleyball Mascot or nickname: Chargers List official coop name: Nelson County (Coop name and mascot must be the same as other coops if the same schools are involved.)

Fill in the current participation numbers for each grade for each school involved: Indicate if you did not sponsor (DNS) this activity the previous year. Boys and girls enrollments are combined only for fine arts.

School #1: (7-8)10(7	-12) (9-12) _	12_DNS
School #2: (7-8)6_ (7-12) (9-12)	15 DNS
School #3: (7-8) (7		
School #4: (7-8) (7		
School #5: (7-8) (7		

Fill in next year's projected participation numbers for each grade for each school involved: Boys and girls enrollments may be combined for fine arts only.

School #1: (7-8) _	12	(7-12)	(9-12)12	-
School #2: (7-8) _	6	_(7-12)	(9-12)11	
School #3: (7-8) _		(7-12)	(9-12)	
School #4: (7-8) _		(7-12)	(9-12)	_
School #5: (7-8) _		(7-12)	(9-12)	_

In the space provided, please list the reasons for requ	uesting this coop application:
Our goal is to have student-athletes play at their appr	ropriate grade and ability level. With declining
numbers we are having to bring up younger athletes	who may not be ready to play at the level they are
required to. This coop would allow us to field teams a	at each grade level where students can develop.
This would allow our student-athletes to enjoy the pro	
If approved, will this coop affect other schools: please	
Region 4 would be down one team	
Is this the nearest opportunity for schools to coop? p If No, Please indicate why closer school(s) are not in	olease circle: (Yes) (No) cluded in this application.
Has displacement of student been considered by each list he reason for this application to improve competition of the particle	ion levels or make participation available. Explain: articipation available for all students in both of our
Other information that be useful for the NDHSAA Box	ard of Directors in reaching a decision: ents. We feel that this is a necessary move to sustain
	participation and we want our student-athletes to have
every opportunity to succeed and we feel this coop p	
Required Signatures: School #1: Delease Proce B. M. School #2/ Hale E. B. M. School	Superintendent. Date: 4-16-3020
School #3:	_ Superintendent. Date:
School #4	_ Superintendent. Date:
School #5	_ Superintendent. Date:
NDHSAA Board Action: Signed	l: Date:

Approved: January 23, 2009—latest review: October 8, 2009